Case 19-11852 Doc 1 Filed 02/12/19 Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	Write the name that is on your government-issued picture identification (for example, your driver's	Diane First name	First name
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.		Moore Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years	Diane M Robinson	
		de your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer utification number	xxx-xx-4477	

Debtor 1 Diane R Moore

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	7804 Winnsboro Dr	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Prince Georges				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 19-11852 Doc 1 Filed 02/12/19 Page 3 of 51

7. The chapter of the Bankruptcy Code you are choosing to file under Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attactions.	Case number (if known)		
 7. The chapter of the Bankruptcy Code you are choosing to file under 8. How you will pay the fee Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address. 			
Bankruptcy Code you are choosing to file under (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, your may porder. If your attorney is a pre-printed address.			
Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address.	342(b) for Individuals Filing for Bankruptcy		
Chapter 12 Chapter 13 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney a pre-printed address.			
Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address.			
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may porder. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address.			
about how you may pay. Typically, if you are paying the fee yourself, you may p order. If your attorney is submitting your payment on your behalf, your attorney is a pre-printed address.			
The Filing Fee in Installments (Official Form 103A).	nay pay with cash, cashier's check, or money rney may pay with a credit card or check with		
□ I request that my fee be waived (You may request this option only if you are fi but is not required to, waive your fee, and may do so only if your income is less applies to your family size and you are unable to pay the fee in installments). If the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and	less than 150% of the official poverty line that s). If you choose this option, you must fill out		
9. Have you filed for No.			
bankruptcy within the last 8 years? Yes.			
District Maryland When 8/20/10 Ca	Case number 10-29078		
	Case number 07-20829		
	Case number		
10. Are any bankruptcy ■ No			
cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate?			
Debtor Rela	Relationship to you		
District When Case	Case number, if known		
	Relationship to you		
District When Cas	Case number, if known		
11. Do you rent your No. Go to line 12.			
residence?			
□ No. Go to line 12.			
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against</i> this bankruptcy petition.	gainst You (Form 101A) and file it as part of		

Case 19-11852 Doc 1 Filed 02/12/19 Page 4 of 51

Deb	otor 1 Diane R Moore			Case number (if known)		
Day	4.2. Danast Abaut Any Br		You Own as a Sole Proprie	***		
rai	t 3: Report About Any Bu	1511162262	Tou Own as a Sole Proprie	901		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of but	siness		
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	ate & ZIP Code		
	separate sheet and attach it to this petition.		Check the appropriate he	ox to describe your business:		
	it to this petition.			iness (as defined in 11 U.S.C. § 101(27A))		
			_	Il Estate (as defined in 11 U.S.C. § 101(51B))		
				defined in 11 U.S.C. § 101(53A))		
				er (as defined in 11 U.S.C. § 101(33A))		
				- ' ' '		
			None of the abov	e 		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Por	t 4: Report if You Own or	· Hava An	, Hazardaua Branarty ar Ar	ny Property That Needs Immediate Attention		
	Do you own or have any		nazardous Property of Ar	ry Property That Needs ininiediate Attention		
	property that poses or is	No.				
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is the hazard?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or		When is the great of			
	livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	argent repairs:			Number, Street, City, State & Zip Code		

Debtor 1 **Diane R Moore** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-11852 Doc 1 Filed 02/12/19 Page 6 of 51

Debtor 1 Diane R Moore			Case number (if known)					
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are de ersonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily	business debts? Business debts are debts				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts yo	u owe that are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	oter 7. Go to line 18.				
	Do you estimate that after any exempt	☐ Yes.		7. Do you estimate that after any exempt pro available to distribute to unsecured creditors	perty is excluded and administrative expenses s?			
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				er 7, I am aware that I may proceed, if eligible e relief available under each chapter, and I c				
				id not pay or agree to pay someone who is n I the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
		I request	relief in accordance with th	ne chapter of title 11, United States Code, sp	ecified in this petition.			
		bankrupt and 357	cy case can result in fines ι	ent, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Diane F		Signature of Debt	or 2			
		Executed	February 12, 2019		M / DD / YYYY			

Case 19-11852 Doc 1 Filed 02/12/19 Page 7 of 51

Debtor 1 Diane R Moore Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Juaria L. Nelson Signature of Attorney for Debtor	Date	February 12, 2019 MM / DD / YYYYY			
Juaria L. Nelson 24687					
Law Offices of Juaria L. Nelson					
6509 Old Branch Avenue, Suite 201 Camp Springs, MD 20748					
Number, Street, City, State & ZIP Code					
Contact phone 301-449-1301	Email address	jlnelsonlaw@aol.com			
24687 MD Bar number & State					

Certificate Number: 13858-MD-CC-032244264

13858-MD-CC-032244264

CERTIFICATE OF COUNSELING

I CERTIFY that on February 3, 2019, at 8:34 o'clock PM EST, Diane Moore received from MoneySharp Credit Counseling Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Maryland, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 3, 2019

By: /s/Sheila Anderson

Name: Sheila Anderson

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Case 19-11852 Doc 1 Filed 02/12/19 Page 9 of 51

		Odoc	710 11002 800	1 1 1100 02/12/10 1 age 0 01		
Fill i	n this inforn	nation to identify your	case:			
Debt	or 1	Diane R Moore First Name	Middle Name	Last Name		
Debt	or 2	i iist ivaine	Wilder Name	Last vanie		
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bai	nkruptcy Court for the:	DISTRICT OF MARYLA	ND		
	e number					
(if kno	wn)				_	k if this is an
					aniei	nded filing
~ · ·		4000				
		rm 106Sum				
				nd Certain Statistical Information		12/15
infori	mation. Fill o	out all of your schedul	es first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amended the box at the top of this page.		
		•	new Summary and Check	t the box at the top of this page.		
Part	1: Summa	arize Your Assets				
						assets of what you own
1.		/B: Property (Official Fo			•	229,796.00
	1a. Copy line	e 55, Total real estate, f	rom Schedule A/B		\$	229,790.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	7,323.53
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B		\$	237,119.53
Part	2: Summ	arize Your Liabilities				
ran	Z. Guillin	arize rour Elabinites				
						iabilities nt you owe
2.	Schedule D	: Creditors Who Have C	laims Secured by Property	(Official Form 106D)		•
				the bottom of the last page of Part 1 of Schedule D	\$	358,513.70
3.			Unsecured Claims (Official	,	•	25 775 40
	3a. Copy th	e total claims from Part	1 (priority unsecured claims	s) from line 6e of Schedule E/F	\$	25,775.49
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	39,464.95
				Your total liabilities	\$	423,754.14
Part	3: Summ	arize Your Income and	Expenses			
4.		Your Income (Official Fo			¢	3,299.63
	Copy your c	ombined monthly incom	e from line 12 of Schedule	<i>I</i>	\$	3,233.03
5.	Schedule J:	Your Expenses (Official onthly expenses from li	Form 106J)		\$	2,374.87
Port			Administrative and Statis			
Part	4. Allswe	i These Questions for	Administrative and Statis	Stical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Ch	heck this box and submit this form to the court with you	ır other so	chedules.
	Yes					
7.	What kind o	of debt do you have?				
				debts are those "incurred by an individual primarily for a g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
	☐ Your d	ebts are not primarily	consumer debts. You hav	ve nothing to report on this part of the form. Check this	box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Case 19-11852 Doc 1 Filed 02/12/19 Page 10 of 51

Debtor 1 Diane R Moore Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,715.88

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	25,775.49
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,775.49

	Cas	se 19-1185	02 I	J0C1 F	iled 02/12/19 P	age 11 of	51	
Fill in this inform	mation to identify yo	our case and th	nis filin	g:				
Debtor 1	Diane R Moore		Nome		Lost Name			
Debtor 2	First Name	Middle	e Name		Last Name			
(Spouse, if filing)	First Name	Middle	Name		Last Name			
United States Ba	ankruptcy Court for the	e: DISTRICT	OF MA	RYLAND				
Case number _					_			☐ Check if this is an amended filing
Official Fo	orm 106A/B							
Schedul	e A/B: Pro	pertv						12/15
think it fits best. B information. If mor Answer every ques	Be as complete and acc re space is needed, atta stion.	urate as possibl ach a separate sl	e. If two	married people his form. On th	an asset fits in more than one are filing together, both a see top of any additional page won or Have an Interest In	re equally resp	onsible for su	pplying correct
1. Do you own or I ☐ No. Go to Par ☐ Yes. Where i	rt 2.	able interest in a	ny resid	dence, building	, land, or similar property?			
	nsboro Dr , if available, or other descrip	tion	•	Single-family	y? Check all that apply home Iti-unit building			ims or exemptions. Put d claims on Schedule D:
				Condominium	or cooperative	Creditors V	Vho Have Clain	ns Secured by Property.
Fort Wash	hington MD 2	20744-0000 ZIP Code			operty	Current va entire pro \$22		Current value of the portion you own? \$229,796.00
			Who	Other has an interes	t in the property? Check one	_ (such as f	ee simple, tena e), if known.	our ownership interest ancy by the entireties, or
Prince Ge	eorges			Debtor 1 only Debtor 2 only		Fee sim	pie	
County			Othe	Debtor 1 and At least one of	Debtor 2 only of the debtors and another ou wish to add about this i	(see in	structions)	munity property
	nave attached for Pa				from Part 1, including a			\$229,796.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 19-11852 Doc 1 Filed 02/12/19 Page 12 of 51

Deb	btor 1 Diane R Moore	Case number (if known)			
3. C	Cars, vans, trucks, tractors, sport utility v	rehicles, motorcycles			
	□ No				
	Yes				
2 1	1 Make: Lexus	Who has an interest in the property? Check one	Do not deduct sec	ured claims or exemptions. Put	
3.1 Make: Lexus Model: GS		Debtor 1 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.	
	Year: 2004	Debtor 2 only			
	Approximate mileage: 130004229.	Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?	
	Other information:	☐ At least one of the debtors and another	,	, ,	
		☐ Check if this is community property	\$4,229	.00 \$4,229.00	
		(see instructions)		<u> </u>	
5 %		wn for all of your entries from Part 2, including		\$4,229.00	
.ŗ	pages you have attached for Part 2. Write	e that number here	=>		
Part	t 3: Describe Your Personal and Household	Items			
Do	you own or have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
<i>E</i>	Household goods and furnishings Examples: Major appliances, furniture, liner □ No ■ Yes. Describe	ns, china, kitchenware			
				#0.000.00	
	Household Go	odsSee attached list		\$2,098.00	
E	Electronics Examples: Televisions and radios; audio, vi including cell phones, cameras, No □ Yes. Describe	deo, stereo, and digital equipment; computers, p media players, games	orinters, scanners; music co	ollections; electronic devices	
E	Collectibles of value Examples: Antiques and figurines; paintings other collections, memorabilia, c ■ No	s, prints, or other artwork; books, pictures, or oth collectibles	er art objects; stamp, coin,	or baseball card collections;	
	☐ Yes. Describe				
<i>E</i>	musical instruments	and other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes a	and kayaks; carpentry tools;	
	■ No □ Yes. Describe				
10.	Firearms Examples: Pistols, rifles, shotguns, ammur	nition, and related equipment			
	■ No □ Yes. Describe				

Case 19-11852 Doc 1 Filed 02/12/19 Page 13 of 51

Debtor 1	Diane R Moore	Case number (if known)	
11. Clothe <i>Exam</i> _i □ No	es ples: Everyday clothes, furs, leather coats,	designer wear, shoes, accessories	
	Describe		
	Wassing Apparel C	as attacked list	\$746.00
	Wearing ApparelS	ee attached list	\$740.00
□ No		ngagement rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
	Furs &JewelrySee	attached list	\$50.00
<i>Exam</i> _l □ No	arm animals ples: Dogs, cats, birds, horses Describe		
	1 dog		\$100.00
14. Any ot ■ No	ther personal and household items you o	did not already list, including any health aids you did not list	
☐ Yes.	Give specific information		
	the dollar value of all of your entries fror art 3. Write that number here	m Part 3, including any entries for pages you have attached	\$2,994.00
Part 4: De	escribe Your Financial Assets		
Do you ov	wn or have any legal or equitable interes	t in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you have in your wallet, in you	r home, in a safe deposit box, and on hand when you file your petiti	on
		Cash	\$20.00
Exam _i □ No		accounts; certificates of deposit; shares in credit unions, brokerage unts with the same institution, list each. Institution name:	nouses, and other similar
	17.1.	Bank of America (1758)	\$80.53
	s, mutual funds, or publicly traded stock. ples: Bond funds, investment accounts with		
■ No	Institution or issu	iler name.	
	ublicly traded stock and interests in incoventure	orporated and unincorporated businesses, including an interes	t in an LLC, partnership, and

Case 19-11852 Doc 1 Filed 02/12/19 Page 14 of 51

De	ebtor 1	Diane R Moore	Case number (if known)	
	☐ Yes.	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia	mment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promise egotiable instruments are those you cannot transfer to someone by	ssory notes, and money orders.	
	☐ Yes.	Give specific information about them Issuer name:		
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings a	accounts, or other pension or profit-sharing plans	
	☐ Yes. I	List each account separately. Type of account: Institution nan	ne:	
22.	Your sl Examp	ty deposits and prepayments hare of all unused deposits you have made so that you may continuoles: Agreements with landlords, prepaid rent, public utilities (electri		thers
	■ No □ Yes.	Institution nan	ne or individual:	
23.	Annuiti	ies (A contract for a periodic payment of money to you, either for lif	e or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		is in an education IRA, in an account in a qualified ABLE progr C. §§ 530(b)(1), 529A(b), and 529(b)(1).	am, or under a qualified state tuition program.	
	☐ Yes	Institution name and description. Separately file the	records of any interests.11 U.S.C. § 521(c):	
25.	■ No	equitable or future interests in property (other than anything I	isted in line 1), and rights or powers exercisable	for your benefit
26.	Patents Examp ■ No	s, copyrights, trademarks, trade secrets, and other intellectual ples: Internet domain names, websites, proceeds from royalties and Give specific information about them		
27.		es, franchises, and other general intangibles		
	Examp ■ No	oles: Building permits, exclusive licenses, cooperative association h	oldings, liquor licenses, professional licenses	
D.A		Give specific information about them	Cu	womt value of the
IVI	oney or p	property owed to you?	poi Do	rrent value of the rtion you own? not deduct secured ims or exemptions.
28.	■ No	funds owed to you		
	⊔ Yes. (Give specific information about them, including whether you alread	y filed the returns and the tax years	
29.		support oles: Past due or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, property settleme	ent
	_	Give specific information		
30.		amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefit benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compensation,	Social Security
	No			

Case 19-11852 Doc 1 Filed 02/12/19 Page 15 of 51

Debtor 1	Diane R Moore	Case number (if known)	
☐ Yes.	Give specific information		
	sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurar	nce
	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you some No	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died. Give specific information	ce policy, or are currently entitled to rec	eive property because
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or managery ples: Accidents, employment disputes, insurance claims, or rights to sure the company of the c		
■ No	contingent and unliquidated claims of every nature, including cou	nterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did not already list Give specific information		
	the dollar value of all of your entries from Part 4, including any ent		\$100.53
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List	any real estate in Part 1.	
	own or have any legal or equitable interest in any business-related property	1?	
_	o to Part 6. Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Ha you own or have an interest in farmland, list it in Part 1.	ave an Interest In.	
■ No	u own or have any legal or equitable interest in any farm- or comm . Go to Part 7. s. Go to line 47.	ercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not L	ist Above	
	u have other property of any kind you did not already list? ples: Season tickets, country club membership		
	Give specific information		
54. Add	the dollar value of all of your entries from Part 7. Write that numbe	r here	\$0.00

Case 19-11852 Doc 1 Filed 02/12/19 Page 16 of 51

Debtor 1 **Diane R Moore** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$229,796.00 Part 2: Total vehicles, line 5 \$4,229.00 57. Part 3: Total personal and household items, line 15 \$2,994.00 58. Part 4: Total financial assets, line 36 \$100.53 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$7,323.53 Copy personal property total \$7,323.53 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$237,119.53

GET MORE INFO

♥ SAVE SHARE

PRE-

FORECLOSURE

AUCTION

Foreclosure Estimate: \$229,436 Zestimate*:

\$286,796

MORE *

☑ EXPAND

X CLOSE

Public View Owner View Owner View 7804 Winnsboro Dr

Public View

Owner View



7804 Winnsboro Fort Washington, MD 20744

-- beds · 2.5 baths 1,490 sqft

This is a 1490 square foot, 2.5 bathroom, single family home. It is located at 7804 Winnsboro Dr Fort Washington, Maryland.

Find foreclosure specialists in your area. Visit our professional directory.

CONTACT FORECLOSURE AGENT

Find a foreclosure specialist

Facts and Features

Real Property Data Search

Search Result for PRINCE GEORGE'S COUNTY

View N	lap		View GroundRe	nt Red	emption		View GroundRent Registration				
Тах Ех	empt:				-	fax Recapt	ure:				
Exemp	ot Class:				NONE						
Account	Identifier	:	Distric	t - 12 A		mber - 125	5181				
						nfoamulion.					
Owner N	ame:		MOOR	E DIAN	E			Use: Principal R	esidence:	RESIDI YES	ENTIAL
Mailina A	Address:		7804 V	/INNSR	ORO DR			Deed Refer		/00000/	/ nnnnn
mailing A	adui ess.					20744-215	59	Deca Itelei	01100.	700007	00000
				ا تساسل	911 00 5 \$ 14	glass (n. s.)	nation.				
Premises	s Address	51			ORO DR NGTON 201	744-0000		Legal Desc	ription:		
Мар:	Grid:	Parcel:	Sub District:	Subd	ivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:	A- 5837
0105	00F3	0000		0180		05	0	51	2019	Plat Ref:	
Specia	al Tax Are	as:			To	own:			NON	E	
-					A	d Valorem:					
					Ta	ax Class:			8		
Primar Built	ry Structu	re	Above Grade Area	Living	Fir Ar	nished Bas ea	ement	Prop Area	erty Land	Cou	nty Use
1970			1,490 SF		YE	S		16,75	9 SF	001	
Stories		ement	Туре		Exterior	Full/Hal		Garage		jor Renov	vation
1	YES	i 	STANDARD UI	NII 	FRAME	2 fuli/ 1	nair	1 Attache	a 		
			 			nformation:					
			Base V	alue		alue			ssessments		
						s of I/01/2019		As of 07/01/2018		s of 7/01/2019	
Land:			76,200			5,200					
Improv	vements		179,100)	223,500						
Total:			255,300)	299,700			255,300	2	70,100	
Prefere	ential Lan	id:	0						0		
					Transfer	bil surrainor					
Seller:	: CASON,	ANN REV	OCABLE TR		Date: 07/	08/2005			Price: \$316	,000	
Type:	NON-ARM	IS LENGT	H OTHER		Deed1: /00000/ 00000				Deed2:		
Seller	: CASON,I	FRED W 8	ANN		Date: 01/	25/2002			Price: \$0		
	•		'H OTHER			-55- 15415/ 0036	69		Deed2:		
					Date: 03/18/1980				Price: \$71,4	100	
	: ZABRET ARMS LE					16/1960 05238/ 0090	17		Deed2:	1 00	
i Ahe:	AINIO LE		TOVED						DOGGE.		
Partial F	Exempt As	sessmen	ts: Class		24.7.1	# 30.00% E # 0.50 T F &		07/01/2018		07/01/2	2019
	-		000					0.00			
County:			000					0.00			
County: State:								0.00 0.00		0.00 0.	.00
_	al:		000					•		-	
State: Municip	al: xempt:		000		Special	Tax Recapt	ture:				
State: Municipa Tax Ex			000		Special NONE	Tax Recap	ture:				

Advertisement

2004 Lexus GS **Pricing Report**



Style: GS 300 Sedan 4D Mileage: 130,000

Vehicle Highlights

Fuel Economy:

City 16/Hwy 23/Comb 19 MPG

Doors: 4 Engine: 6-Cyl, 3.0 Liter

Drivetrain: RWD Transmission: Automatic, 5-Spd

w/Overdrive

Max Seating: 5

EPA Class: Midsize Cars Body Style: Sedan

Country of Origin: Japan Country of Assembly: Japan

Sell To Private Party

Private Party Range \$3,058 - \$5,399 Private Party Value

\$4,229



Valid for ZIP Code 20744 through 02/07/2019

Your Configured Options

Our pre-selected options, based on typical equipment for this car.

✓ Options that you added while configuring this car.

Engine

6-Cyl, 3.0 Liter

Transmission

Automatic, 5-Spd w/Overdrive

Drivetrain

RWD

Braking and Traction

Traction Control ABS (4-Wheel)

Comfort and Convenience

Air Conditioning Power Windows Power Door Locks

Cruise Control

Steering

Power Steering Telescoping Wheel

Entertainment and Instrumentation

AM/FM Stereo CD/MP3 (Single Disc)

Safety and Security

Dual Air Bags Side Air Bags

Seats

Dual Power Seats Leather

Roof and Glass

Moon Roof

Wheels and Tires

Alloy Wheels

Exterior Color

√ Black

Glossary of Terms

Kelley Blue Book® Trade-in Value - This is the amount you can expect to receive when you trade in your car to a dealer. This value is determined based on the style, condition, mileage and options

Tip:

It's crucial to know your car's true condition when you sell it, so that you

THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MARYLAND

Diane R.	Moore		s.s.#: <u>/</u> /	XX-XX-	4477
(Husband or indi	Midual 2 name	<i>31</i>			
(Spouse's name o	of joint filir		s.s.#:		<u> </u>
NOTE: When compare garage/yard/	HOUSEHOLD (GOODS AND FL	IIIAA TOP T	he article ticles th	s that at you
ITEM	QUANTITY	VALUE	ITEM	QUANTITY	VALUE
APPLIANCES: Air Conditione Blender Camcorder Can Opener Clocks Clothes Dryer Food Processor Freezer Microwave Personal Comput Radio Sewing Machine Stereo/Speaker Stove Toaster/Oven T.V (Color) T.V. (B/W) Vacuum Cleaner VCRs Washer	0 2: 2 1 0 0 0 1	80. NIA 12. 50. NIA 40. NIA MIA MIA 50. 40. 10. 30. 40. 10. 30.	Desks Lamps Loveseat Organ Piano Sofa TABLES Dining End Kitche Living OUTDOOR Chairs Table LINENS CURTAINS DISHES POTS UTENSILS OTHER	sets sets sets sets	50, 30, 50, 50, 60, 60, 20, 100, 4, 2, 3, 100, 2, 2, 100, 2, 2, 100, 2, 100, 2, 100, 2, 100, 2, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100, 100,
BEDS:(Including Adult Children Cribs	water) 4	400-	TOTAI	of PAGE	98-
BUREAUS	34	200.	≯_ _		
CHAIRS: Bedroom Dining Room Kitchen Living Room	- i - i - j j	56 126 20 50			

THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MARYLAND

DIANC OF	R. Moor	(s name)	s.s.#:_ <u>\</u>	XXX -4477-
(Spouse's n	ame of join	t filing)	5.5.#:	- 23
NOTE: When are garage/	completing yard/pawnab	WEARING APP) this form give le value. Lis		he articles that rticles that you
LADIES CLOTH	IING	•	MEN'S	CLOTHING
ITEM	QUANTITY	VALUE	ITEH	QUANTITY VALUE
Blouses Boots Coats Dresses Gloves Jeans Gowns Hats Nightwear Purses Robes Scarves Shorts Skirts Socks Shoes Stockings Suits Sweaters Swimsuit Sweats Underwear	3 20 20 20 3 4 10 4 3 10 4 3 10 4 3 10 10 10 10 10 10 10 10 10 10	21. 166- 100 20. 20. 20. 20. 10. 10. 10.	Boots Coats Hats Gloves Jackets Jeans Robes Scarves Shirts Shorts Slacks Socks Suits Sweaters Shoes Umbrella Underwear Uniforms Slippers Swimsuit Sweats	
Other: Please	list		Other: Pl	ease list

TOTAL	LAUTES/MENS	CLOTHING
s	74	6-

\$4.35 \$10

Case 19-11852 Doc 1 Filed 02/12/19 Page 22 of 51

THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MARYLAND

	1				
Drane	R. Moore		S.S.#	:	
(Husband or	individual's	name)			1
			S.S.#	:	
(Spouse's na	ame of joint	filing)	•		
NOTE: When are garage/yown.	FURS/JEWELL completing the yard/pawnable	RY/FIREARMS/ his form giv value. Li	e values f	or the artic	cles that that you
ITEM	QUANTITY	VALUE	ITEM	QUANTITY	VALUE
Furs Jewelry(Do n Bracelets Éarrings Necklaces Pendants Pins Rings Watches	ot list costs O O O O O	s 50 ime jewelry!	Firearms S. Equip Cameras Hobby Eq		0 0
		920		S * S	
•	.12	8			
COTAL FURS/JE	EWELRY	то	TAL FIREAR	S/SPORTS EC	UIP/ETC
			*	20	

Case 19-11852 Doc 1 Filed 02/12/19 Page 23 of 51

Debtor 1	Diane R Moore			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number _				
(if known)				☐ Check if this is ar

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2004 Lexus GS 130004229. miles Line from <i>Schedule A/B</i> : 3.1	\$4,229.00		\$4,229.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
			100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,	
Household GoodsSee attached list Line from Schedule A/B: 6.1	\$2,098.00		\$900.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Ellio II on Concount / V.D.			100% of fair market value, up to any applicable statutory limit		
Furs &JewelrySee attached list	\$50.00		\$50.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Ellio II oli			100% of fair market value, up to any applicable statutory limit	1100.3 11 004(3)(0)	
1 dog Line from Schedule A/B: 13.1	\$100.00		\$100.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
Ellie Holli Gonedale AVB. 1911			100% of fair market value, up to any applicable statutory limit	110013 11 004(2)(4)	
Cash Line from Schedule A/B: 16.1	\$20.00	•	\$20.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
Line from Generalic A/D. 10.1			100% of fair market value, up to		

Case 19-11852 Doc 1 Filed 02/12/19 Page 24 of 51

ebtor 1	Diane R Moore		Case number (if known)					
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.					
	nk of America (1758) from Schedule A/B: 17.1	\$80.53	\$80.53	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)				
LINE	TIOTI Schedule A.B. 1111		☐ 100% of fair market value, up to any applicable statutory limit	1100.3 11 00-(0)(0)				
	you claiming a homestead exemption oject to adjustment on 4/01/19 and every		5? ses filed on or after the date of adjustmen	nt.)				
	No							
_	110							
_		ed by the exemption wi	thin 1,215 days before you filed this case	?				
_		ed by the exemption wi	thin 1,215 days before you filed this case	?				

Creditor's Name 7804 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	12/15 ore space
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name Last Name	12/15 ore space
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF MARYLAND Case number (if known) Check if this is amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If m is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and c number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has a particular claim, list the other creditor's name. Part 1: List All Secured Claims 2. List all secured claims in alphabetical order according to the creditor's name. Describe the property that secures the claim: T804 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	12/15 ore space
Check if this is amended filing	12/15 ore space
Case number (If known) Check if this is amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If m is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and conumber (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims. 2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim used collateral. SPS Describe the property that secures the claim: 7804 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	12/15 ore space
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If m is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and community (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the order oreditors in Part 2. As mount of claim Do not deduct the value of collateral, as usupports this claim Table Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	12/15 ore space
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If m is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and conumber (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Describe the property that secures the claim: Table 4 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	ore space
is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and conumber (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim with a supports this claim. 2.1 SPS Describe the property that secures the claim: 7804 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	
1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Describe the property that secures the claim: Table 4 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	
□ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. □ Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 SPS □ Describe the property that secures the claim: □ T804 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	
Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 SPS Describe the property that secures the claim: Table 4 Winnsboro Dr Fort Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 SPS Describe the property that secures the claim: Table 1 Table 2 Column A Amount of claim Do not deduct the value of collateral that supports this claim Creditor's Name Table 2 Table 3 Table 3 Table 4 Table 4 Table 4 Table 4 Table 5 Table 6 Table 6 Table 5 Table 6 Table 7 Table 6 Table 7 Table 6 Table 7 Table 6 Table 6 Table 7 Table 6 Table 7	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 SPS Describe the property that secures the claim: Table 1 Table 2 Column A Amount of claim Do not deduct the value of collateral that supports this claim Value of collateral that supports this claim If any Table 3 Secure 4 Amount of claim Do not deduct the value of collateral that supports this claim Value of collateral Secure 5 Table 4 Column B Value of collateral that supports this claim Value of collateral Secure 5 Calumn B Value of collateral Secure 5 Column B Value of collateral	
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 SPS Describe the property that secures the claim: Take that supports this claim Satisfactory of the property that secures the claim: Take that supports this claim Satisfactory of the property that secures the claim: Take that supports this claim Satisfactory of the property that secures the claim: Satisfactory of the property that secures the claim: Take that supports this claim Satisfactory of the property that secures the claim: Satisfactory of the property that supports this claim that supports this claim. Satisfactory of the property that supports the property that s	n C
2.1 SPS Creditor's Name Tenditor's Name Describe the property that secures the claim: \$358,513.70 \$229,796.00 \$126 Tenditor's Name Tendit	
Washington, MD 20744 Prince Georges County As of the date you file, the claim is: Check all that	8,717.70
арруу.	
Salt Lake City, U1 84165 Number, Street, City, State & Zip Code Unliquidated	
Disputed	
Who owes the debt? Check one. Nature of lien. Check all that apply.	
Debtor 1 only An agreement you made (such as mortgage or secured	
Debtor 2 only car loan)	
□ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ Statutory lien (such as tax lien, mechanic's lien)	
☐ At least one of the debtors and another ☐ Check if this claim relates to a ☐ Other (including a right to offset) ☐ Mortgage Mortgage	
Check if this claim relates to a community debt Other (including a right to offset)	
Date debt was incurred 04/05 Last 4 digits of account number 3461	
Add the dollar value of your entries in Column A on this page. Write that number here: \$358,513.70	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$358,513.70	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-11852 Doc 1 Filed 02/12/19 Page 26 of 51

	Lin thin informa	ation to identify your o	2000					1		
H	in this informa	ation to identify your (ase:							
De	btor 1	Diane R Moore								
Do	btor 2	First Name	Middl	e Name	Last Nam	9				
1	ouse if, filing)	First Name	Middl	e Name	Last Nam	е				
Un	ited States Bank	cruptcy Court for the:	DISTRIC	T OF MARYLAND						
Ca	se number									
	nown)							☐ Check	if this is an	1
								amend	ed filing	
Of	ficial Form	106E/E								
		F: Creditors W	ho Hav	e Unsecure	d Claim	e			12/15	
any Sch Sch left. nam	executory contra edule G: Executo edule D: Creditor Attach the Contin e and case numb	accurate as possible. Us cts or unexpired leases ry Contracts and Unexpi s Who Have Claims Secon nuation Page to this pag per (if known).	that could r red Leases ured by Pro e. If you hav	esult in a claim. Also (Official Form 106G) perty. If more space i ve no information to	o list executo . Do not incluis is needed, co	ry contract ide any cre py the Part	s on Schedule A/B: I ditors with partially s you need, fill it out,	Property (Official For secured claims that a number the entries in	m 106A/B) a re listed in 1 the boxes	and on on the
		s have priority unsecured								
••	□ No. Go to Par		a ciaiiiis agi	amst you!						
	Yes.									
2.	List all of your p identify what type possible, list the o	riority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priorit	ty and nonpriority amount to the creditor's name.	unts, list that of If you have n	claim here a	nd show both priority a	and nonpriority amount	s. As much	as
	(For an explanation	on of each type of claim, s	ee the instru	ctions for this form in t	the instruction	booklet.)	Total claim	Priority amount	Nonpriorit amount	ty
2.1	Comptro	ller of Maryand		Last 4 digits of acco	ount number	4477	\$3,945.00	\$3,945.00	amount	\$0.00
	Priority Cred			When we the debt	:10	2047				
	110 Carro Annapoli	s, MD 21411-0001		When was the debt	incurred?	2017		-		
		eet City State Zlp Code		As of the date you f	ile, the claim	is: Check a	II that apply			
	Who incurred t	he debt? Check one.		☐ Contingent						
	Debtor 1 onl	у		☐ Unliquidated						
	Debtor 2 onl	у		☐ Disputed						
	Debtor 1 and	d Debtor 2 only		Type of PRIORITY u	insecured cla	ıim:				
	☐ At least one	of the debtors and anothe	r	☐ Domestic support	obligations					
	☐ Check if this	s claim is for a commun	ity debt	Taxes and certain	other debts	ou owe the	government			
	Is the claim su	bject to offset?		☐ Claims for death of	or personal in	ury while yo	u were intoxicated			
	■ No			Other. Specify _						
	☐ Yes				State Inco	me Taxes	S			
2.2		ller of Maryand		Last 4 digits of acco	ount number	4477	\$2,737.49	\$2,737.49		\$0.00
	Priority Cred	oll Street		When was the debt	incurred?	2015		-		
		s, MD 21411-0001 eet City State Zlp Code		As of the date you f	ile, the claim	is: Check a	II that apply			
	Who incurred t	he debt? Check one.		☐ Contingent						
	Debtor 1 onl	у		☐ Unliquidated						
	Debtor 2 onl	у		☐ Disputed						
	Debtor 1 and	d Debtor 2 only		Type of PRIORITY u	insecured cla	ıim:				
		of the debtors and anothe	r	☐ Domestic support	obligations					
		s claim is for a commun		Taxes and certain	other debts	ou owe the	government			
	Is the claim su		•	☐ Claims for death			-			
	■ No			☐ Other. Specify						
	☐ Yes				State Inco	me Taxes	:			

Official Form 106 E/F

Case 19-11852 Doc 1 Filed 02/12/19 Page 27 of 51

De	btor 1 Diane R Moore						
2.3	Internal Revenue Service	Last 4 digits of account number	4477	\$16,583.00	\$16,583.00	\$0.00	
	Priority Creditor's Name P.O. Box 7346 Philodolphia DA 10404 7346	When was the debt incurred?	2017				
	Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:				
	☐ At least one of the debtors and another ☐ Domestic support obligations						
	☐ Check if this claim is for a community debt	Taxes and certain other debts	ou owe the g	government			
	Is the claim subject to offset?	Claims for death or personal in	ury while you	were intoxicated			
	■ No	Other. Specify					
	Yes	Federal Inc	come Tax	es			
2.4	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	4477	\$2,510.00	\$2,510.00	\$0.00	
	P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the g	government			
	Is the claim subject to offset?	Claims for death or personal in	ury while you	were intoxicated			
	■ No						
	□ Yes Federal Income Taxes						
Pa	rt 2: List All of Your NONPRIORITY Unsecu	red Claims					
3.	Do any creditors have nonpriority unsecured claim	ns against you?					
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.				
	Yes.						
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify when the control of the cont	nat type of cla	aim it is. Do not list claim	is already included in Par	t 1. If more	

Total claim

Case 19-11852 Doc 1 Filed 02/12/19 Page 28 of 51

Debtor	1 Diane R Moore		Case number (if known)						
4.1	Accounts Clearing House Nonpriority Creditor's Name	Last 4 digits of account number	1068	\$445.00					
	P.O. Box 2373 c/o Doctor's Community Hospital Glen Burnie, MD 21060	When was the debt incurred?	12/14						
	Number Street City State Zlp Code Who incurred the debt? Check one.	Ilp Code As of the date you file, the claim is: Check all that apply							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:						
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify Medical bill							
4.2	American Credit Acceptance Nonpriority Creditor's Name	Last 4 digits of account number	4227	\$19,802.00					
	961 E. Main Street, 2nd Fl Spartanburg, SC 29302	When was the debt incurred?	05/14						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent	-						
	Debtor 2 only	Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	☐ Student loans						
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims							
	■ No	☐ Debts to pension or profit-sharin							
	Yes	Other. Specify Deficient C	ar Loan						
4.3	Comptroller of Maryand	Last 4 digits of account number	4477	\$2,421.99					
	Nonpriority Creditor's Name 110 Carroll Street Annapolis, MD 21411-0001	When was the debt incurred?	2014						
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another								
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	sharing plans, and other similar debts						
	☐ Yes ☐ Other. Specify State Income Taxes								

Case 19-11852 Doc 1 Filed 02/12/19 Page 29 of 51

Debto	r 1 Diane R Moore	Case number (if known)					
4.4	Internal Revenue Service	Last 4 digits of account number	4477	\$2,596.07			
	Nonpriority Creditor's Name P.O. Box 7346	When was the debt incurred?	2004				
	Philadelphia, PA 19101-7346						
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	\square Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Federal Inc	ome Taxes				
4.5	Internal Revenue Service	Last 4 digits of account number	4477	\$734.01			
	Nonpriority Creditor's Name	_					
	P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2010				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Federal Inc					
4.6	Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number	4477	\$3,727.47			
	P.O. Box 7346	When was the debt incurred?	2011				
	Philadelphia, PA 19101-7346	_					
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	■ Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Federal Inc	onie raxes				

Case 19-11852 Doc 1 Filed 02/12/19 Page 30 of 51

Debtor	1 Diane R Moore		Case number (if known)	
4.7	Internal Revenue Service	Last 4 digits of account number	4477	\$4,276.69
	Nonpriority Creditor's Name P.O. Box 7346	When was the debt incurred?	2013	
	Philadelphia, PA 19101-7346			-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Federal Inc	• •	
	_ 163	Other. Specify	omo ruxes	-
4.8	Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number	4477	\$3,882.47
	P.O. Box 7346	When was the debt incurred?	2012	
	Philadelphia, PA 19101-7346			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lalatan	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Federal Inc.	ome Taxes	
				-
4.9	Slomin's Inc. Nonpriority Creditor's Name	Last 4 digits of account number	4477	\$1,272.25
	1051 E. Hillsdale Blvd, Suite 500 San Mateo, CA 94404	When was the debt incurred?	2009	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	_	report as priority claims Debts to pension or profit-sharin	a plans, and other similar debte	
	■ No	· ·	5 i	
	Yes	Other. Specify Security Sy	stem	-

Case 19-11852 Doc 1 Filed 02/12/19 Page 31 of 51

1 Diane R Moore		Case number (if known)				
United Consumers	Last 4 digits of account number	7241	\$			
Nonpriority Creditor's Name	_					
14203 Telegraph Rd	When was the debt incurred?	08/17				
c/o Ft. Washington Medical Ctr						
Woodbridge, VA 22192-4615 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	•	,				
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims					
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
□Yes	Other. Specify Medical bil	I				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				٦	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	25,775.49
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	25,775.49
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,464.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	39,464.95

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-11852 Doc 1 Filed 02/12/19 Page 32 of 51

Fill in this infor				
Debtor 1	Diane R Moore			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND		
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1			, , ,		
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

Case 19-11852 Doc 1 Filed 02/12/19 Page 33 of 51

				•	
Fill in this i	nformation to identify your	case:			
Debtor 1	Diane R Moore				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Casa numb	•				
Case numb (if known)	er				☐ Check if this is an amended filing
O((; ;)	E 40011				Č
	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
	in the last 8 years, have you				states and territories include
Arizona	ı, California, Idaho, Louisiana	, Nevada, New Mexico, Pl	ieπo Rico, Texas, vvasni	ngton, and wisconsin.)	
	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2 Form 1	2 again as a codebtor only	f that person is a guaran	itor or cosigner. Make s	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt
				_	,
3.1 N	lame			_ ☐ Schedule D, line ☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	lumber Street			_	
	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			_ ☐ Schedule E/F, lir	
				☐ Schedule G, line	
	lumber Street			_	
C	ity	State	ZIP Code		

Case 19-11852 Doc 1 Filed 02/12/19 Page 34 of 51

Fill	in this information to identify yo	our case:								
Del	btor 1 Diane R	Moore								
	btor 2 buse, if filing)									
Uni	ited States Bankruptcy Court fo	r the: DISTRICT OF MARY	LAND		_					
(If kr	se number fficial Form 106l		-			☐ An		nt showing	g postpetition ollowing date:	
	chedule I: Your I					MM	// DD/ Y\	YYY		12/1
spo atta	plying correct information. If use. If you are separated and ch a separate sheet to this for the Describe Employment 1:	your spouse is not filing w rm. On the top of any addit	ith you, do not inclu	ide infor	mati	on about y	our spoi	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2	or non-fil	ling spouse	
	If you have more than one job attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Employ			
	employers. Include part-time, seasonal, of self-employed work.	Occupation or Employer's name	Retired							
	Occupation may include stud or homemaker, if it applies.	ent Employer's address								
		How long employed t	there?							
Pai	rt 2: Give Details About	Monthly Income								
spoi	mate monthly income as of the use unless you are separated.	•	,	•	•				·	J
mor	ou or your non-filing spouse have e space, attach a separate she	et to this form.		illioi ali t	ampi					you need
						For Debt	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, deductions). If not paid mont			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly of	vertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$	0	0.00	\$	N/A	

Case 19-11852 Doc 1 Filed 02/12/19 Page 35 of 51

Debtor 1		Diane R Moore	-	(Case number (if known)						
					For [Debtor 1			Debtor :		
	Cop	y line 4 here	4.		\$	C	0.00	\$		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	c	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$		N/A	-
	5e.	Insurance	5e) .	\$		0.00	\$		N/A	-
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	-
	5g.	Union dues	5g	J.	\$	C	0.00	\$		N/A	=
	5h.	Other deductions. Specify:	5h	1.+	\$	C	0.00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.		\$	C	0.00	\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	C	0.00	\$		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									-
		monthly net income.	8a	ì.	\$	C	0.00	\$		N/A	_
	8b.	Interest and dividends	8b).	\$	C	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		5.00	\$		N/A	_
	8d.	Unemployment compensation	8d	1.	\$		0.00	\$		N/A	-
	8e.	Social Security	8e	€.	\$	183	3.75	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	8g		\$	2,340		\$		N/A	_
	8h.	Other monthly income. Specify: Familly Contribution	_ 8h	1.+	\$	400	0.00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	\$	3,299	.63	\$		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3	,299.63	+ \$		N/A	= \$	3,299.63
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,	Ľ				0,200.00
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00										
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							12.	\$	3,299.63
										Combine month!	ned y income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								
	1 1	Yes. Explain:									

Official Form 106I Schedule I: Your Income page 2

	in this informs	diam da inlamdife				1						
		ition to identify yo										
Deb	tor 1	Diane R Moore					Check if this is: An amended filing					
Deb	tor 2					_	ū	ving postpetition chapter				
(Spo	ouse, if filing)					·	13 expenses as of	the following date:				
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF MARYLAND		ī	MM / DD / YYYY					
	e number nown)											
Of	fficial Fo	orm 106J				-						
Sc	chedule	J: Your	Exper	ises				12/15				
Be a	as complete a ormation. If m nber (if know	and accurate as lore space is ne n). Answer eve	s possible eded, atta ry questio	If two married people ar								
Pari	Is this a joir	ribe Your House nt case?	enoid									
	■ No. Go to	line 2.										
			in a separ	ate household?								
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.					
0			_	, ,	•							
2.	•	e dependents?	■ No									
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state	the						□ No				
	dependents	names.						Yes				
								□ No □ Yes				
								☐ Yes				
								☐ Yes				
								□ No				
_	_							☐ Yes				
3.	expenses o	penses include f people other t d your depende	han $_{\square}$	No Yes								
Par		ate Your Ongoi										
exp				uptcy filing date unless y y is filed. If this is a supp								
				government assistance i								
	value of sucl ficial Form 10		d have inc	eluded it on Schedule I: Y	our Income		Your exp	enses				
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4. \$		1,270.87				
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a. \$		0.00				
		rty, homeowner's	s, or renter	's insurance		4b. \$	-	0.00				
	4c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c. \$		60.00				
_		owner's associa				4d. \$		0.00				
5.	Additional r	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00				

Case 19-11852 Doc 1 Filed 02/12/19 Page 37 of 51

ebtor 1 Diane R I	loore	Case num	ber (if known)	
Utilities:	annt matural and	60	c	450.00
• .	neat, natural gas	6a.	·	150.00
	er, garbage collection	6b.	·	70.00
•	cell phone, Internet, satellite, and cable services	6c.	· <u> </u>	50.00
6d. Other. Spe		6d.	·	0.00
	keeping supplies	7.	·	400.00
	nildren's education costs	8.		0.00
	y, and dry cleaning	9.		50.00
•	oducts and services	10.	· -	54.00
Medical and den	•	11.	\$	45.00
	nclude gas, maintenance, bus or train fare.	12.	\$	100.00
Do not include ca	r payments. Iubs, recreation, newspapers, magazines, and books	13.	·	
		13. 14.	·	75.00
	butions and religious donations	14.	Φ	0.00
Insurance.	surance deducted from your pay or included in lines 4 or 20			
15a. Life insurar	surance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
15b. Health insu		15a. 15b.	·	0.00
15c. Vehicle ins		15b. 15c.	·	0.00
15d. Other insur		15d.	· -	0.00
		13u.	Ψ	0.00
Specify:	lude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
Installment or le	ase payments:		Ψ	0.00
17a. Car payme		17a.	\$	0.00
17b. Car payme		17b.	· -	0.00
17c. Other. Spe		17c.	·	0.00
17d. Other. Spe		17d.		0.00
•	of alimony, maintenance, and support that you did not repor		<u> </u>	0.00
	our pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10		\$	0.00
	you make to support others who do not live with you.	/-	\$	0.00
Specify:		19.		
Other real prope	rty expenses not included in lines 4 or 5 of this form or on S	Schedule I: Yo	our Income.	
20a. Mortgages	on other property	20a.	\$	0.00
20b. Real estate	taxes	20b.	\$	0.00
20c. Property, h	omeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenand	e, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowne	r's association or condominium dues	20e.	\$	0.00
Other: Specify:	Pet Care	21.	+\$	50.00
				33.33
-	onthly expenses			
22a. Add lines 4 t			\$	2,374.87
22b. Copy line 22	(monthly expenses for Debtor 2), if any, from Official Form 106J	J-2	\$	
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	2,374.87
Coloulote vers :	anthly not income			
•	nonthly net income. 2 (your combined monthly income) from Schedule I.	23a.	¢	2 200 62
	• ,		·	3,299.63
23D. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,374.87
23c Subtract vo	ur monthly expenses from your monthly income.			
	or monthly expenses from your monthly income. s your <i>monthly net income</i> .	23c.	\$	924.76
THE TESUIL	o you. Monuny not moonio.			
Do you expect a	n increase or decrease in your expenses within the year after	er you file this	s form?	
For example, do you	expect to finish paying for your car loan within the year or do you expect			se or decrease because of a
	erms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

=					
Fill in this in	nformation to identify your	case:			
Debtor 1	Diane R Moore				
D 1 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	•				
United State	es Bankruptcy Court for the:	DISTRICT OF MARYLAND			
Case numbe	≘r				
(if known)				☐ Check if this is an	
				amended filing	
Official F	orm 106Dec				
Declar	ration About a	ın Individual D	ebtor's Sched	lules 12	2/15
	oney or property by fraud ii th. 18 U.S.C. §§ 152, 1341, 1 Sign Below		tcy case can result in fines	up to \$250,000, or imprisonment for up to 2	20
Did yo	u pay or agree to pay some	one who is NOT an attorney	to help you fill out bankrup	etcy forms?	
■ No	0				
□ Y€	es. Name of person			Attach Bankruptcy Petition Preparer's Notice	e,
_	· <u></u>			Declaration, and Signature (Official Form 1	19)
	penalty of perjury, I declare by are true and correct.	that I have read the summar	y and schedules filed with t	this declaration and	
X /s/	Diane R Moore		Х		
	ane R Moore		Signature of Debtor	2	
	nature of Debtor 1		•		
Dat	te February 12, 2019		Date		
					

Fill	in this inform	mation to identify you	r case:			
Deb	otor 1	Diane R Moore				
		First Name	Middle Name	Last Name		
	otor 2	First Name	Addalla Nassa	Last Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF MARYLA	AND		
Cas	se number					
	nown)					Check if this is an
						amended filing
∩f	ficial Fo	rm 107				
			Affaira for Indiv	iduala Eilina far l	Popleruptov	414.
<u> </u>	atement	oi Financiai	Allairs for indiv	iduals Filing for I	Бапкгирісу	4/10
				are filing together, both ar		
		n). Answer every que		o this form. On the top of a	ny additional pages, write	your name and case
	` 	>		out the d Defens		
Par	t 1: Give I	Details About Your Ma	arital Status and Where Yo	DU LIVEG BETORE		
1.	What is you	r current marital stati	us?			
	☐ Married	1				
	■ Not ma					
	- Not ma	med				
2.	During the I	ast 3 years, have you	lived anywhere other than	n where you live now?		
	■ Na					
	■ No	et all of the places you	lived in the last 3 years. Do.	not include where you live no	NA/	
	— 103. Li	st all of the places you	iived iii tiie last 5 years. Do	not morade where you live he	, vv.	
	Debtor 1 Pi	rior Address:	Dates Debtor	1 Debtor 2 Prior A	Address:	Dates Debtor 2
			lived there			lived there
3.				egal equivalent in a commu		
state	es and territor	ies include Arizona, Ca	alifornia, Idano, Louisiana, N	levada, New Mexico, Puerto	Rico, Texas, washington ar	id wisconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors (Official Form 106H).		
Par	t 2 Expla	in the Sources of You	ır Income			
4.	Did you hav	e any income from e	mnlovment or from operat	ing a business during this	year or the two previous o	alendar vears?
٠.	Fill in the total	al amount of income yo	ou received from all jobs and	d all businesses, including pa	rt-time activities.	alendar yeurs.
	If you are filing	ng a joint case and you	have income that you rece	ive together, list it only once	under Debtor 1.	
	■ No					
		I in the details.				
	_ ,					
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income Check all that apply.	Gross income
			Check all that apply.	(before deductions and exclusions)	oneck all that apply.	(before deductions and exclusions)
				,		

Case number (if known)

5.	Include include and other	come regard public benef	lless of wheth it payments;		kamples of <i>other income</i> are erest; dividends; money col	e alimony; child supplected from lawsuits;	port; Social Security, unemp royalties; and gambling and ebtor 1.	
	List each	source and t	he gross inco	me from each source separ	ately. Do not include incom	e that you listed in li	ne 4.	
	□ No ■ Yes.	Fill in the de	etails.					
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		uctions
	om January e date you f		nt year until ikruptcy:	Retirement/Social Security/Alimony	\$6,423.5	0		
	r last calen anuary 1 to		31, 2018)	Retirement /Social Security/Alimony	\$38,685.0	0		
	r the calendary 1 to			Retirement /Social Security/Alimony	\$33,471.0	0		
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
3.	Are either No.	Neither De	ebtor 1 nor D	s debts primarily consume ebtor 2 has primarily cons personal, family, or househouse	sumer debts. Consumer de	ebts are defined in 11	1 U.S.C. § 101(8) as "incurre	ed by an
			•	re you filed for bankruptcy, o	did you pay any creditor a t	otal of \$6,425* or mo	ore?	
		□ _{No.} □ _{Yes}	Go to line 7		aid a total of \$6 425* or ma	ro in one or more no	yments and the total amoun	t vou
		100	paid that cre not include		ents for domestic support of this bankruptcy case.	oligations, such as c	hild support and alimony. Al	
	■ Ves			r both have primarily cons		on or alter the date t	n adjustinent.	
	_ 103.			re you filed for bankruptcy, o		otal of \$600 or more	?	
		■ No.	Go to line 7					
		□ Yes	include payı				you paid that creditor. Do n Also, do not include paymer	
	Creditor'	s Name and	d Address	Dates of paym	ent Total amount paid	Amount you still owe	Was this payment for	
	Within 1 y	clude your r	elatives; any		f any general partners; par of 20% or more of their vot	tnerships of which your ing securities; and a	o was an insider? ou are a general partner; cor ny managing agent, includir	
7.	Insiders in of which y				clude payments for domes	tic support obligation	ns, such as child support and	
7.	Insiders in of which y a business				iclude payments for domes	iic support obligation	ns, such as child support and	
7.	Insiders in of which y a business alimony.	s you operat		oprietor. 11 U.S.C. § 101. Ir	iclude payments for domes	iic support obligation	ns, such as child support and	

Debtor 1 Diane R Moore

Case 19-11852 Doc 1 Filed 02/12/19 Page 41 of 51

Case number (if known)

8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	ny property (on account of a c	lebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you		r this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No ■ Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of t	he case
	Case number CDM v. Diane R Moore CAEF18-28619	Foreclosure	Circuit Court P George's Coun 14735 Main Stre Upper Marlbord	ty eet	☐ Pending ☐ On app ☐ Conclud	eal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address				arnished, attache Date	Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No		luding a bank or fin	ancial institu	ution, set off any	amounts from your
	☐ Yes. Fill in the details. Creditor Name and Address	Describe the action the	e creditor took		Date action was aken	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		erty in the possessi	on of an ass	ignee for the ben	efit of creditors, a
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gift	s with a total value	of more than	\$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave he gifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Diane R Moore

Case number (if known)

14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or			ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anyth	ning because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. Loc claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition of the No Yes. Fill in the details.	preparin	g a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Law Offices of Juaria L. Nelson 6509 Old Branch Avenue, Suite 201 Camp Springs, MD 20748 jlnelsonlaw@aol.com	1	Attorney Fees		02-07-19	\$1,995.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed to not include any payment or transfer that	ditors or	to make payments to your creditor	r behalf pay o	r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	ur busine s made a	ess or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you					

Debtor 1 Diane R Moore

Debtor 1 Diane R Moore Case number (if known)

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		y property to a	self-settle	d trust or similar device o	f which you are a
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and S	torage Unit	s	made
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated.	ther financial accour	nts; certificates	s of deposi		
	Yes. Fill in the details.					
		ast 4 digits of ecount number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, a	ny safe dep	posit box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year befor	e you filed for bankruptc	/?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	ude any proper	ty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pa	tt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface	e water, ground	• .		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	environmental	law, wheth	er you now own, operate,	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		as a hazardous	s waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Diane R Moore

Case number (if known)

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?			
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.			
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business					
27.	With	nin 4 years before you filed for bankrupte	cy, did you own a business or have an	y of the following connections to an	y business?			
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time				
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to Part 12.						
		Yes. Check all that apply above and fill in the details below for each business.						
	Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification numbe Do not include Social Security				
	(1441	instit, street, only, state and 211 south	Name of accountant or bookkeeper	Dates business existed				
28.		nin 2 years before you filed for bankrupte itutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Incl	ude all financial			
		No Yes. Fill in the details below.						
		me dress mber, Street, City, State and ZIP Code)	Date Issued					
	(raul							

Case 19-11852 Doc 1 Filed 02/12/19 Page 45 of 51

Debtor 1 Diane R Moore	Case number (if known)	
Part 12: Sign Below		
are true and correct. I understand that mal	Financial Affairs and any attachments, and I declare under penalty of perjury that the answer a false statement, concealing property, or obtaining money or property by fraud in connect to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Diane R Moore		
Diane R Moore Signature of Debtor 1	Signature of Debtor 2	
Date February 12, 2019	Date	
Did you attach additional pages to <i>Your St</i> ■ No □ Yes	nent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
Did you pay or agree to pay someone who	ot an attorney to help you fill out bankruptcy forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

		District of Marylana			
In re	Diane R Moore		Case No.		
		Debtor(s)	Chapter	13	
	VER	VERIFICATION OF CREDITOR MATRIX			
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.					
Date:	February 12, 2019	/s/ Diane R Moore			
		Diane R Moore			

Signature of Debtor

Accounts Clearing House P.O. Box 2373 c/o Doctor's Community Hospital Glen Burnie, MD 21060

American Credit Acceptance 961 E. Main Street, 2nd Fl Spartanburg, SC 29302

Comptroller of Maryand 110 Carroll Street Annapolis, MD 21411-0001

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Slomin's Inc. 1051 E. Hillsdale Blvd, Suite 500 San Mateo, CA 94404

SPS P.O. Box 65250 Salt Lake City, UT 84165

United Consumers 14203 Telegraph Rd c/o Ft. Washington Medical Ctr Woodbridge, VA 22192-4615